

ENTRY BLANK

CV

PLEASE TYPE OR PRINT

Entered previous May Show

Ms.

yes no

Mr. Artist

Gene Thomas Gambill

(Last Name Last)

Permanent Address

Street

City

16520 DETRIOT Ave.

Lakewood, O.

Zip

Area Code

Temporary Address

Street

City

Tel. () home

221-4716

Zip

Area Code

Permanent address is in what county? _____

Born in Cuyahoga County Yes No

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

Artist will pick up at Museum.

Museum should dispose of.

Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Gene Thomas Gambill

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

watercolor on 3ply strathmore

Title

Optation #4

Sold

Price or NFS	Insurance Value If NFS Only	Size
150.		144" x 15"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frame
215	(1)		

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

215

(1)

X

FEE PAID

BY

AC

10.20

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

Price or NFS	Insurance Value If NFS Only	Size

GRAPHICS AND PHOTOGRAPHY ONLY

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DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

RECEIVED

BY

10/00

.00